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CONFIRMATION NO. 2615

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|---|---|-------------------------------|---|---|
| SERIAL NUMBER 08/833,506 | FILING OR 371(c) DATE 04/07/1997 RULE | CLASS 435 | GROUP ART UNIT 1643 | ATTORNEY DOCKET NO. 14291 |
| APPLICANTS ROBERT WEBBER, RICHMOND, CA; | | | | |
| ** CONTINUING DATA ***** SJH This application is a CIP of 08/634,332 04/12/1996 PAT 6,531,578 | | | | |
| ** FOREIGN APPLICATIONS ***** SJH None | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 08/11/1997 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>SJH</u> Examiner's Signature Initials | | STATE OR COUNTRY CA | SHEETS DRAWING 30 | TOTAL CLAIMS 21 INDEPENDENT CLAIMS 3 |
| ADDRESS 28061 | | | | |
| TITLE IMMUNOASSAY METHOD EMPLOYING MONOCLONAL ANTIBODY REACTIVE TO HUMAN INOS | | | | |
| FILING FEE RECEIVED 419 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |